

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request:	10-21-04	2 Serial/Patent #	10/823,609
--------------------	----------	-------------------	------------

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input type="checkbox"/>	Extension of Time			\$
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/>	Petition	IFW	8-18-04	\$ 130
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$

7 TOTAL AMOUNT OF REFUND	\$ 130
--------------------------	--------

8 TO BE REFUNDED BY:

Treasury Check

X	Credit Deposit A/C #: <input type="text" value="15140316"/>
---	--

10 REASON:

Overpayment

Duplicate Payment

X No Fee Due (Explanation):

Proved we lost papers

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME:	Steven Brad Key	TITLE:	Patent Attorney
---------------------	-----------------	--------	-----------------

SIGNATURE:		PHONE:	202-3203
------------	---	--------	----------

OFFICE:	PCF4215
---------	---------

***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****

APPROVED:

DATE:	10/22/04
-------	----------

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance

Refund Branch

Crystal Park One, Room 802B